

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Priorities USA Action		FEC IDENTIFICATION NUMBER ▼ C C00495861	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>	

Full Name of Payee FUSE			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>		
Mailing Address 802 N 1st St			Amount <table border="1" style="width:100%">136000.00</table>		
City Saint Louis	State MO	Zip Code 63102-2529	Transaction ID : VNTYH9TYE83		
Purpose of Expenditure TV Ad Buy (Estimate)		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>		
Name of Federal Candidate TRUMP, DONALD J, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%">125357349.02</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee FUSE			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>		
Mailing Address 802 N 1st St			Amount <table border="1" style="width:100%">4700.00</table>		
City Saint Louis	State MO	Zip Code 63102-2529	Transaction ID : VNTYH9TYGY1		
Purpose of Expenditure Video Production (Estimate)		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>		
Name of Federal Candidate TRUMP, DONALD J, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%">125357349.02</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="width:100%">140700.00</table>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<table border="1" style="width:100%"> </table>
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="width:100%"> </table>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Speed, Greg, , ,

[Electronically Filed]

Date

 /

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Signature